

<i>SERFF Tracking Number:</i>	<i>NRTH-125778053</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>North American Specialty Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>08-03880</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
<i>Product Name:</i>	<i>Entertainment Program - General Liability</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: North American Specialty Insurance Company

Product Name: Entertainment Program - SERFF Tr Num: NRTH-125778053 State: Arkansas

General Liability

TOI: 17.0 Other Liability - Claims SERFF Status: Closed State Tr Num: EFT \$50

Made/Occurrence

Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: 08-03880 State Status: Fees verified and received

Filing Type: Form Co Status: Submitted to SID Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding

Author: Alsa Shih Disposition Date: 08/25/2008

Date Submitted: 08/21/2008 Disposition Status: Approved

Effective Date Requested (New): 10/01/2008 Effective Date (New):

Effective Date Requested (Renewal): 10/01/2008 Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Pending

Project Number: Domicile Status Comments:

Reference Organization: Reference Number:

Reference Title: Advisory Org. Circular:

Filing Status Changed: 08/25/2008

State Status Changed: 08/25/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

North American Specialty Insurance Company (NAS) presents the enclosed filing to make available insurance products designed specifically for entertainment related risks including motion picture; documentaries; short term productions; retail houses; recording studios; shows; etc.

Please refer to the attached filing memorandum and the forms index for the details of this filing.

SERFF Tracking Number: NRT-125778053 State: Arkansas
Filing Company: North American Specialty Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: 08-03880
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: Entertainment Program - General Liability
Project Name/Number: /

Company and Contact

Filing Contact Information

Alsa Shih, State Filings Assistant Alsa_Shih@nasins.com
650 Elm Street (800) 542-9200 [Phone]
Manchester, NH 03101 (603) 644-6613[FAX]

Filing Company Information

North American Specialty Insurance Company	CoCode: 29874	State of Domicile: New Hampshire
650 Elm Street	Group Code: 181	Company Type:
Manchester, NH 03101-2524	Group Name:	State ID Number:
(800) 542-9200 ext. [Phone]	FEIN Number: 02-0311919	

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
North American Specialty Insurance Company	\$50.00	08/21/2008	22062818

SERFF Tracking Number: NRTH-125778053 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	08/25/2008	08/25/2008

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Product Name: *Entertainment Program - General Liability*
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Disposition

Disposition Date: 08/25/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Filing Memorandum	Approved	Yes
Supporting Document	Form Indices	Approved	Yes
Form	Commercial General Liability Declarations Entertainment Program	Approved	Yes
Form	Liquor Liability Declarations Entertainment Program	Approved	Yes
Form	Schedule of Forms	Approved	Yes
Form	Comprehensive Personal Liability Coverage	Approved	Yes
Form	Personal Liability Schedule	Approved	Yes
Form	Policy Changes	Approved	Yes
Form	Policy Changes	Approved	Yes
Form	Covered Production Limitation Endorsement	Approved	Yes
Form	Final Audit	Approved	Yes
Form	Minimum Premium Endorsement	Approved	Yes
Form	Non-Insured Production Entity Conditional Exclusion	Approved	Yes
Form	Schedule of Feature Film Productions	Approved	Yes
Form	Unscheduled Production, Presentation or Event Exclusion	Approved	Yes
Form	Schedule of Events	Approved	Yes
Form	Schedule of Productions	Approved	Yes
Form	Schedule of Covered Stunt Activities	Approved	Yes
Form	Specified Production Dates	Approved	Yes
Form	Venue Rating Schedule	Approved	Yes
Form	Lessee Conditional Exclusion	Approved	Yes
Form	Limited Aircraft Coverage Endorsement	Approved	Yes
Form	Newly Acquired or Formed Entity Exclusion	Approved	Yes
Form	Promoters Rating Schedule	Approved	Yes
	Promotion Limitation Endorsement	Approved	Yes

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Form

Form	Property Damage to Rented Premises Exclusion	Approved	Yes
Form	Total Pollution Exclusion Endorsement	Approved	Yes
Form	TULIP Rating Schedule	Approved	Yes
Form	Employment-Related Practices Exclusion	Approved	Yes
Form	Total Pollution Exclusion Endorsement	Approved	Yes
Form	Workers' Compensation Residence Employee	Approved	Yes
Form	Concessionaire/Exhibitor Rate Endorsement	Approved	Yes
Form	Condition - Periodic Reporting	Approved	Yes
Form	Premium Rate Schedule	Approved	Yes
Form	Additional Insured - Owners or Lessees Scheduled Person or Organization Co-Primary Endorsement	Approved	Yes
Form	Additional Insured - Owners or Lessees Scheduled Person or Organization Excess Endorsement	Approved	Yes
Form	Additional Insured - Owners or Lessees Scheduled Person or Organization Primary and Noncontributory Endorsement	Approved	Yes
Form	Assault and Battery Exclusion	Approved	Yes
Form	Informational Content Exclusion	Approved	Yes
Form	Injury to Participants in Sports or Athletics Activities Exclusion	Approved	Yes
Form	Libel, Slander, Right to Privacy, Advertising Idea, Copyright, Trade Dress and Slogan Exclusion	Approved	Yes
Form	Limited Additional Insured - Attractions, Exhibitors, Food or Non-Food Concessionaires	Approved	Yes
Form	Moshing Exclusion	Approved	Yes
Form	Non-Performing Animal Exclusion	Approved	Yes

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Form	Rap and Hip-Hop Conditional Exclusion	Approved	Yes
Form	Unscheduled Products Limitation	Approved	Yes
	Endorsement		
Form	Seating, Glass & Fixtures Exclusion	Approved	Yes
Form	Security Service Conditional Limitation	Approved	Yes
Form	Attendance Limitation Endorsement	Approved	Yes
Form	Event Limitation Endorsement	Approved	Yes
Form	Hazardous Activities, Pyrotechnic & Animal Exposure Exclusion	Approved	Yes
Form	Liquor Liability Exclusion	Approved	Yes
Form	Overnight, Outdoor and Temporary Structure Camping Conditional Exclusion	Approved	Yes
Form	Partnership, Joint Venture and Limited Liability Company Exclusion	Approved	Yes
Form	Rental Receipts Conditional Endorsement	Approved	Yes
Form	Eligible Classes of Production(s), Presentation(s) or Event(s) Limitation Endorsement	Approved	Yes
Form	Absolute Asbestos Exclusion	Approved	Yes
Form	Abuse or Sexual Molestation Exclusion	Approved	Yes
Form	Lead Contamination Exclusion	Approved	Yes
Form	Media Content Exclusion	Approved	Yes
Form	Throwing Objects Exclusion	Approved	Yes
Form	Fungus, Mildew and Mold Exclusion	Approved	Yes
Form	Monthly Reporting Endorsement	Approved	Yes
Form	General Aggregate Limit of Liability Endorsement	Approved	Yes
Form	Employee Defined	Approved	Yes
Form	Cross Suits Exclusion	Approved	Yes
Form	False Arrest, Detention, Imprisonment, Libel, Slander, Right to Privacy, Advertising Idea, Copyright, Trade Dress and Slogan Exclusion	Approved	Yes
Form	Additional Insured Endorsement	Approved	Yes

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Product Name: *Entertainment Program - General Liability*
Project Name/Number: */*

Operations or Premises Owned by or
 Rented to You

Form	Communicable Disease Exclusion	Approved	Yes
Form	Premium Rate Schedule Endorsement	Approved	Yes
Form	Production Stunt, Pyrotechnic & Animal Exposure Exclusion	Approved	Yes

SERFF Tracking Number: NRT-125778053 State: Arkansas

Filing Company: North American Specialty Insurance Company State Tracking Number: EFT \$50

Company Tracking Number: 08-03880

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability

Product Name: Entertainment Program - General Liability

Project Name/Number: /

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Commercial General Liability Declarations Entertainment Program	NAS-ABGL-DEC	(06/08)	Declaration News/Schedule		0.00	NAS-ABGL-DEC ED 06-08.pdf
Approved	Liquor Liability Declarations Entertainment Program	NAS-ABLL-DEC	(06/08)	Declaration News/Schedule		0.00	NAS-ABLL-DEC ED 06-08.pdf
Approved	Schedule of Forms	NAS-ABF-SCH	(06/08)	Declaration News/Schedule		0.00	NAS-ABF-SCH ED 06-08.pdf
Approved	Comprehensive Personal Liability Coverage	NAS-ABCPL-POL	(06/08)	Policy/Coverage New Form		0.00	NAS-ABCPL-POL ED 06-08.pdf
Approved	Personal Liability Schedule	NAS-ABCPL-SCH	(06/08)	Endorsement New Amendment/Conditions		0.00	NAS-ABCPL-SCH ED 06-08.pdf
Approved	Policy Changes	NAS-AB-PC1	(06/08)	Endorsement New Amendment/Conditions		0.00	NAS-AB-PC1 ED 06-08.pdf
Approved	Policy Changes	NAS-AB-PC2	(06/08)	Endorsement New Amendment/Conditions		0.00	NAS-AB-PC2 ED 06-08.pdf
Approved	Covered Production Limitation Endorsement	NAS-AB-001	(06/08)	Endorsement New Amendment/Conditions		0.00	NAS-AB-001 ED 06-08.pdf
Approved	Final Audit	NAS-AB-	(06/08)	Endorsement New		0.00	NAS-AB-002

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Product Name: Entertainment Program - General Liability

Project Name/Number: /

		002		nt/Amendm ent/Condi ons		ED 06- 08.pdf
Approved	Minimum Premium Endorsement	NAS-AB- 003	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-003 ED 06- 08.pdf
Approved	Non-Insured Production Entity Conditional Exclusion	NAS-AB- 004	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-004 ED 06- 08.pdf
Approved	Schedule of Feature Film Productions	NAS-AB- 005	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-005 ED 06- 08.pdf
Approved	Unscheduled Production, Presentation or Event Exclusion	NAS-AB- 006	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-006 ED 06- 08.pdf
Approved	Schedule of Events	NAS-AB- 007	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-007 ED 06- 08.pdf
Approved	Schedule of Productions	NAS-AB- 008	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-008 ED 06- 08.pdf
Approved	Schedule of Covered Stunt Activities	NAS-AB- 009	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-009 ED 06- 08.pdf
Approved	Specified Production Dates	NAS-AB- 010	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-010 ED 06- 08.pdf
Approved	Venue Rating Schedule	NAS-AB- 200	(06/08)	Endorseme New nt/Amendm ent/Condi	0.00	NAS-AB-200 ED 06- 08.pdf

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 Product Name: Entertainment Program - General Liability
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Endorsements					
Approved	Lessee Conditional Exclusion	NAS-AB-201	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-201 ED 06-08.pdf
Approved	Limited Aircraft Coverage Endorsement	NAS-AB-202	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-202 ED 06-08.pdf
Approved	Newly Acquired or Formed Entity Exclusion	NAS-AB-205	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-205 ED 06-08.pdf
Approved	Promoters Rating Schedule	NAS-AB-206	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-206 ED 06-08.pdf
Approved	Promotion Limitation Endorsement	NAS-AB-207	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-207 ED 06-08.pdf
Approved	Property Damage to Rented Premises Exclusion	NAS-AB-208	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-208 ED 06-08.pdf
Approved	Total Pollution Exclusion Endorsement	NAS-AB-209	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-209 ED 06-08.pdf
Approved	TULIP Rating Schedule	NAS-AB-210	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-210 ED 06-08.pdf
Approved	Employment-Related Practices Exclusion	NAS-AB-211	(06/08)	Endorsement New/Amendment/Conditions	0.00 NAS-AB-211 ED 06-08.pdf
Approved	Total Pollution	NAS-AB-212	(06/08)	Endorsement New	0.00 NAS-AB-212

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Product Name: Entertainment Program - General Liability

Project Name/Number: /

	Exclusion Endorsement	212		nt/Amendm ent/Condi ons		ED 06- 08.pdf
Approved	Workers' Compensation Residence Employee	NAS-AB- 213	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-213 ED 06- 08.pdf
Approved	Concessionaire/E xhibitor Rate Endorsement	NAS-AB- 214	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-214 ED 06- 08.pdf
Approved	Condition - Periodic Reporting	NAS-AB- 215	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-215 ED 06- 08.pdf
Approved	Premium Rate Schedule	NAS-AB- 216	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-216 ED 06- 08.pdf
Approved	Additional Insured - Owners or Lessees Scheduled Person or Organization Co- Primary Endorsement	NAS-AB- 400	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-400 ED 06- 08.pdf
Approved	Additional Insured - Owners or Lessees Scheduled Person or Organziation Excess Endorsement	NAS-AB- 401	(06/08)	Endorseme New nt/Amendm ent/Condi ons	0.00	NAS-AB-401 ED 06- 08.pdf
Approved	Additional Insured - Owners or Lessees	NAS-AB- 402	(06/08)	Endorseme New nt/Amendm ent/Condi	0.00	NAS-AB-402 ED 06- 08.pdf

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	Scheduled			ons		
	Person or					
	Organization					
	Primary and					
	Noncontributory					
	Endorsement					
Approved	Assault and Battery Exclusion	NAS-AB-403	(06/08)	Endorsement/Amendment/Conditions	0.00	NAS-AB-403 ED 06-08.pdf
Approved	Informational Content Exclusion	NAS-AB-404	(06/08)	Endorsement/Amendment/Conditions	0.00	NAS-AB-404 ED 06-08.pdf
Approved	Injury to Participants in Sports or Athletics Activities Exclusion	NAS-AB-405	(06/08)	Endorsement/Amendment/Conditions	0.00	NAS-AB-405 ED 06-08.pdf
Approved	Libel, Slander, Right to Privacy, Advertising Idea, Copyright, Trade Dress and Slogan Exclusion	NAS-AB-406	(06/08)	Endorsement/Amendment/Conditions	0.00	NAS-AB-406 ED 06-08.pdf
Approved	Limited Additional Insured - Attractions, Exhibitors, Food or Non-Food Concessionaires	NAS-AB-407	(06/08)	Endorsement/Amendment/Conditions	0.00	NAS-AB-407 ED 06-08.pdf
Approved	Moshing Exclusion	NAS-AB-408	(06/08)	Endorsement/Amendment/Conditions	0.00	NAS-AB-408 ED 06-08.pdf
Approved	Non-Performing Animal Exclusion	NAS-AB-409	(06/08)	Endorsement/Amendment	0.00	NAS-AB-409 ED 06-

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				ent/Condi tions		08.pdf
Approved	Rap and Hip-Hop Conditional Exclusion	NAS-AB- 410	(06/08)	Endorseme New nt/Amendm ent/Condi tions	0.00	NAS-AB-410 ED 06- 08.pdf
Approved	Unscheduled Products Limitation Endorsement	NAS-AB- 411	(06/08)	Endorseme New nt/Amendm ent/Condi tions	0.00	NAS-AB-411 ED 06- 08.pdf
Approved	Seating, Glass & Fixtures Exclusion	NAS-AB- 412	(06/08)	Endorseme New nt/Amendm ent/Condi tions	0.00	NAS-AB-412 ED 06- 08.pdf
Approved	Security Service Conditional Limitation	NAS-AB- 413	(06/08)	Endorseme New nt/Amendm ent/Condi tions	0.00	NAS-AB-413 ED 06- 08.pdf
Approved	Attendance Limitation Endorsement	NAS-AB- 415	(06/08)	Endorseme New nt/Amendm ent/Condi tions	0.00	NAS-AB-415 ED 06- 08.pdf
Approved	Event Limitation Endorsement	NAS-AB- 416	(06/08)	Endorseme New nt/Amendm ent/Condi tions	0.00	NAS-AB-416 ED 06- 08.pdf
Approved	Hazardous Activities, Pyrotechnic & Animal Exposure Exclusion	NAS-AB- 417	(06/08)	Endorseme New nt/Amendm ent/Condi tions	0.00	NAS-AB-417 ED 06- 08.pdf
Approved	Liquor Liability Exclusion	NAS-AB- 418	(06/08)	Endorseme New nt/Amendm ent/Condi tions	0.00	NAS-AB-418 ED 06- 08.pdf
Approved	Overnight, Outdoor and Temporary	NAS-AB- 419	(06/08)	Endorseme New nt/Amendm ent/Condi	0.00	NAS-AB-419 ED 06- 08.pdf

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	Structure			ons		
	Camping					
	Conditional					
	Exclusion					
Approved	Partnership, Joint Venture and Limited Liability Company Exclusion	NAS-AB-420	(06/08)	Endorsement/New Amendment/Conditions	0.00	NAS-AB-420 ED 06-08.pdf
Approved	Rental Receipts Conditional Endorsement	NAS-AB-421	(06/08)	Endorsement/New Amendment/Conditions	0.00	NAS-AB-421 ED 06-08.pdf
Approved	Eligible Classes of Production(s), Presentation(s) or Event(s) Limitation Endorsement	NAS-AB-422	(06/08)	Endorsement/New Amendment/Conditions	0.00	NAS-AB-422 ED 06-08.pdf
Approved	Absolute Asbestos Exclusion	NAS-AB-423	(06/08)	Endorsement/New Amendment/Conditions	0.00	NAS-AB-423 ED 06-08.pdf
Approved	Abuse or Sexual Molestation Exclusion	NAS-AB-424	(06/08)	Endorsement/New Amendment/Conditions	0.00	NAS-AB-424 ED 06-08.pdf
Approved	Lead Contamination Exclusion	NAS-AB-425	(06/08)	Endorsement/New Amendment/Conditions	0.00	NAS-AB-425 ED 06-08.pdf
Approved	Media Content Exclusion	NAS-AB-426	(06/08)	Endorsement/New Amendment/Conditions	0.00	NAS-AB-426 ED 06-08.pdf
Approved	Throwing Objects Exclusion	NAS-AB-427	(06/08)	Endorsement/New Amendment/Conditions	0.00	NAS-AB-427 ED 06-08.pdf

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				ons		
Approved	Fungus, Mildew and Mold Exclusion	NAS-AB-428	(06/08)	Endorsement New/Amendment/Conditions	0.00	NAS-AB-428 ED 06-08.pdf
Approved	Monthly Reporting Endorsement	NAS-AB-429	(06/08)	Endorsement New/Amendment/Conditions	0.00	NAS-AB-429 ED 06-08.pdf
Approved	General Aggregate Limit of Liability Endorsement	NAS-AB-430	(06/08)	Endorsement New/Amendment/Conditions	0.00	NAS-AB-430 ED 06-08.pdf
Approved	Employee Defined	NAS-AB-432	(06/08)	Endorsement New/Amendment/Conditions	0.00	NAS-AB-432 ED 06-08.pdf
Approved	Cross Suits Exclusion	NAS-AB-433	(06/08)	Endorsement New/Amendment/Conditions	0.00	NAS-AB-433 ED 06-08.pdf
Approved	False Arrest, Detention, Imprisonment, Libel, Slander, Right to Privacy, Advertising Idea, Copyright, Trade Dress and Slogan Exclusion	NAS-AB-434	(06/08)	Endorsement New/Amendment/Conditions	0.00	NAS-AB-434 ED 06-08.pdf
Approved	Additional Insured Endorsement Operations or Premises Owned by or Rented to You	NAS-AB-435	(06/08)	Endorsement New/Amendment/Conditions	0.00	NAS-AB-435 ED 06-08.pdf
Approved	Communicable	NAS-AB-	(06/08)	Endorsement New	0.00	NAS-AB-436

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	Disease Exclusion	436		nt/Amendment/Conditions		ED 06-08.pdf
Approved	Premium Rate Schedule Endorsement	NAS-AB-500	(06/08)	Endorsement/Amendment/Conditions	0.00	NAS-AB-500 ED 06-08.pdf
Approved	Production Stunt, Pyrotechnic & Animal Exposure Exclusion	NAS-AB-600	(06/08)	Endorsement/Amendment/Conditions	0.00	NAS-AB-600 ED 06-08.pdf



**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY**
650 Elm Street, Manchester, NH 03101-2524
(800) 542-9200
A Stock Insurance Company

Policy Number:
Renewal of Number:

COMMERCIAL GENERAL LIABILITY DECLARATIONS ENTERTAINMENT PROGRAM

Item 1: Named Insured and Mailing Address	Producer Name and Mailing Address	
Business Description:	Type of Business:	Audit Period:

Item 2: Policy Period	From:	To:	At 12:01AM Standard Time at the Mailing Address Shown Above
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Item 3: Coverage and Limits

Coverage

General Aggregate Limit (Other Than Products-Completed Operations)
Products – Completed Operations Aggregate Limit
Personal and Advertising Injury Limit
Each Occurrence Limit
Fire Damage Limit
Medical Payment Limit

Any One Fire
Any One Person

Item 4: Business Description and Location of Premises

Locations of All Premises You Own, Rent or Occupy:

Item 5 Form(s) and Endorsement(s) made a part of the policy at time of issue:

Per Schedule of Forms attached.

Item 6 Insurance is provided against those perils and for those coverages under those sections for which a specific amount or limit of liability is shown in schedules incorporated herein, subject to all terms of the policy and all forms and endorsements made apart hereof.

Date of Issue:

Item 7: Rates and Premium

Loc.	Classification	Code No.	Premium Basis	Rate		Advance Premium	
				Prem/ops	All Other	Prem/ops	All Other
Sub Total							
Additional Coverages:							
Policy Premium:							
Taxes, Surcharges and Fees:							
Total Premium:							
Subject to General Liability policy Minimum Premium of \$ regardless of term.							
Premium Basis: a Area e Each g Gross Production Cost p Payroll s Sales m Admissions u Unit o							

THESE DECLARATIONS, TOGETHER WITH THE COMMON POLICY CONDITIONS AND COVERAGE FORM(S) AND ANY ENDORSEMENTS(S), COMPLETE THE ABOVE NUMBERED POLICY.



**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY**
650 Elm Street, Manchester, NH 03101-2524
(800) 542-9200
A Stock Insurance Company

Policy Number:

Renewal of Number:

LIQUOR LIABILITY DECLARATIONS

Entertainment Program

Item 3: Coverage and Limits

Aggregate Limit
Each Common Cause Limit

Item 4: Premium

Premium
Taxes, Surcharges & Fees
Total
Minimum Premium

Premium Basis

Item 5 Form(s) and Endorsement(s) made a part of the policy at time of issue:

Per Schedule of Forms attached.

Item 6 Insurance is provided against those perils and for those coverages under those sections for which a specific amount or limit of liability is shown in schedules incorporated herein, subject to all terms of the policy and all forms and endorsements made apart hereof.

Date of Issue:

THIS POLICY TOGETHER WITH THE POLICY CONDITIONS, COVERAGE PARTS AND FORMS
AND ENDORSEMENTS, IF ANY, COMPLETE THE ABOVE NUMBER POLICY

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date:

SCHEDULE OF FORMS

COMPREHENSIVE PERSONAL LIABILITY COVERAGE

Throughout this policy, "you" and "your" refer to the "Insured" shown in the Personal Liability Schedule. The words "we", "us" and "our" refer to the Company providing this insurance.

LIABILITY COVERAGES

COVERAGE L. PERSONAL LIABILITY

If a claim is made or a suit is brought against any "Insured" for damages because of "bodily injury", "property damage" or "personal injury" caused by an "occurrence" to which this coverage applies, we will:

- a. pay up to our limit of liability for the damages for which the "Insured" is legally liable; and
- b. provide a defense at our expense by counsel of our choice, even if the suit is groundless, false or fraudulent. We may make any investigation and settle any claim or suit that we decide is appropriate. Our obligation to defend any claim or suit ends when the amount we pay for damages resulting from the "occurrence" equals our limit of liability.

COVERAGE M. MEDICAL PAYMENTS TO OTHERS

We will pay the necessary medical expenses incurred or medically ascertained within three years from the date of any accident causing "bodily injury". Medical expenses means reasonable charges for medical, surgical, x-ray, dental, ambulance, hospital professional nursing, prosthetic devices and funeral services. This coverage does not apply to you or regular residents of your household other than "resident employees". As to others, this coverage applies only:

- a. to a person on the "insured location" with the permission of an "Insured"; or
- b. to a person off the "insured location", if the "bodily injury":
 - (1) arises out of a condition in the "insured location" or the ways immediately adjoining; or
 - (2) is caused by the activities of an "Insured"; or
 - (3) is caused by a "residence employee" in the course of the "residence employee's" employment by an "Insured"; or
 - (4) is caused by an animal owned by or in the care of an "Insured".

EXCLUSIONS

1. COVERAGE L. - Personal Liability and Coverage M. Medical Payments to Others do not apply to "bodily injury" or "property damage":
 - a. which is expected or intended by the "Insured"; or
 - b. arising out of business pursuits of an "Insured" or the rental or holding for rental of any part of any premises by an "Insured".

This exclusion does not apply to:

- (1) activities which are ordinarily incidental to non-business pursuits; or
- (2) the rental or holdings for rental of a residence of yours:
 - (a) on an occasional basis for the exclusive use as a residence; or
 - (b) in part for use only as a residence, unless a single family unit is intended for use by the occupying family to lodge more than two roomers or boarders; or
 - (c) in part, as an office, school, studio or private garage;
- c. arising out of the rendering or failing to render professional services; or
- d. arising out of an oral or written publication or other forms of defamation that occurred prior to the inception date of this policy; or
- e. arising out of:

- (1) the ownership, maintenance, use, loading or unloading of motor vehicles or all other motorized land conveyances, including trailers, owned or operated by or rented or loaned to an "Insured"; or
- (2) the entrustment by an "Insured" of a motor vehicle or any other motorized land conveyance to any person; or
- (3) statutorily imposed vicarious parental liability for the actions of a child or minor using a conveyance excluded in paragraph 1. or 2. Above.

This exclusion does not apply to:

- (1) a trailer not towed by or carried on a motorized land conveyance; or
- (2) a motorized land conveyance designed for recreational use off public roads, not subject to motor vehicle registration; or
- (3) a motorized golf cart; or
- (4) a vehicle or conveyance not subject to motor vehicle registration which is:
 - (a) used to service an "Insured's" residence; or
 - (b) designed for assisting the handicapped; or
 - (c) in dead storage on an "insured location".

f. arising out of:

- (1) the ownership, maintenance, use, loading or unloading of a watercraft described as follows:
 - (a) with inboard or inboard-outdrive motor power more than 50 horsepower; or
 - (b) that is a sailing vessel, with or without auxiliary power, 26 feet or more in length owned by or rented to an "Insured"; or
 - (c) powered by one or more outboard motors with more than 50 total horsepower if the outboard motor is owned by an "Insured". But, outboard motors of more than 50 horsepower are covered for the policy period if:
 - (i) you acquire them prior to the policy period and you declare them at policy inception; or
 - (ii) your intention to insure is reported to us in writing within 45 days after you acquire the outboard motors;
 - (iii) you acquire them during the policy period.

This exclusion does not apply while the watercraft is stored.

- (2) the entrustment by an "Insured" of a watercraft described above to any person; or
- (3) statutorily imposed vicarious parental liability for the actions of a child or minor using a watercraft described above.

g. arising out of:

- (1) the ownership, maintenance, use, loading or unloading of an aircraft; or
- (2) the entrustment by an "Insured" of an aircraft to any person; or
- (3) statutorily imposed vicarious parental liability for the actions of a child or minor using an aircraft.

An aircraft means any contrivance used or designed for flight, except model or hobby aircraft not used or designed to carry people or cargo.

h. arising out of war, whether or not declared, or any act or condition incident to war. War includes civil war, insurrection, rebellion or revolution.

Exclusions d., e., f., and g. do not apply to "bodily injury", "property damage" or "personal injury" to a "residence employee" arising out of and in the course of the "residence employee's" employment by an "Insured".

2. Coverage L - Personal Liability, does not apply to:

a. liability:

- (1) for your share of any loss assessment charged against all members of an association, corporation or community of property owners; or
- (2) under any contract or agreement. However, this exclusion does not apply to written contracts:
 - (a) that directly relate to the ownership, maintenance or use of an "insured location"; or
 - (b) where the liability of others is assumed by the "insured" prior to an "occurrence";unless excluded in 1. above or elsewhere in this policy;

b. "property damage" to property owned by the Insured; or

c. "Property damage" to property rented to, occupied or used by or in the care, custody or control of the "Insured". This exclusion does not apply to "property damage" caused by fire, smoke, explosion or water damage; or

d. "bodily injury" to any person eligible to receive any benefits required to be provided or voluntarily provided by the "Insured" under any Workers' or Workmen's Compensation, non-occupational disability, or occupational disease law; or

e. "bodily injury" or "property damage" for which any "Insured" under this policy is also an "Insured" under a nuclear energy liability policy or would be an "Insured" but for its termination upon exhaustion of its limit of liability. A nuclear energy liability policy is a policy issued by Nuclear Energy Liability Insurance Association, Mutual Atomic Energy Liability Underwriters, Nuclear Insurance Association of Canada, or any of their successors.

f. "bodily injury" or "property damage" arising out of the use, sale, manufacture, delivery, transfer or possession by any person of a Controlled Substance as defined by the Federal Food and Drug Law at 21 U.S.C.A. Sections 811 and 812. Controlled Substances include but are not limited to cocaine, LSD, marijuana and all narcotic drugs. However, this exclusion does not apply to the legitimate use of prescription drugs by a person following the orders of a licensed physician.

g. "bodily injury" or "property damage" which arises out of the transmission of a communicable disease by an "insured".

3. Coverage M - Medical Payments to Others, does not apply to bodily injury:

a. to a residence employee if the "bodily injury" occurs off the "insured" location and does not arise out of or in the course of the "residence employee's" employment by any "Insured"; or

b. to any person eligible to receive any benefits required to be provided or voluntarily provided under any Workers' or Workmen's Compensation, non-occupational disability or occupational disease law; or

c. from any nuclear reaction, radiation or radioactive contamination, all whether controlled or uncontrolled or however caused, or any consequence of any of these; or

d. to any person, other than a "residence employee" of an "Insured", regularly residing on any part of the "insured location".

ADDITIONAL COVERAGES

We cover the following in addition to the limits of liability:

1. Claim Expenses

We pay:

- a. expenses incurred by us and costs taxed against any "Insured" in any suit we defend; and
- b. premiums on bonds required in a suit defended by us, but not for bond amounts greater than the limit of liability for Coverage L. We need not apply for or furnish a bond; and
- c. reasonable expenses incurred by an "Insured" at our request, including actual loss of earnings (but not loss of other income) up to \$100 per day for assisting us in the investigation or defense of a claim or suit; and

- d. interest on the entire judgment which accrues after entry of the judgment and before we pay or tender or deposit in court the part of the judgment which does not exceed the limit of liability that applies.

2. First Aid Expenses

We will pay expenses for first aid to others incurred by any "Insured" for "bodily injury" covered under this policy. We will not pay for first aid to you or any other "Insured".

3. Damage to Property of Others in Your Care, Custody or Control

We will pay up to \$500 per occurrence for "property damage" to Property of Others caused by an "Insured". We will not pay for "property damage":

- a. caused intentionally by an "Insured" who is 16 years of age or older; or
- b. to property owned by an "Insured"; or
- c. to property owned by or rented to a tenant of an "Insured" or a resident in your household; or
- d. arising out of:
 - (1) business pursuits; or
 - (2) any act or omission in connection with a premises owned, rented or controlled by an Insured, other than the insured location; or
 - (3) the ownership, maintenance, or use of aircraft, watercraft or motor vehicles or all other motorized land conveyances.

This exclusion does not apply to a motorized land conveyance designed for recreational use off public roads, not subject to motor vehicle registration and not owned by an Insured.

DEFINITIONS

- 1. "Bodily Injury" means bodily harm, sickness or disease, including required care, loss of services and death that results.
- 2. "Business" includes trade, profession or occupation.
- 3. "Insured" means you and:
 - a. your relatives who are part of your household; and
 - b. other persons under age 21 living with you and under the care of a person named above; and
 - c. with respect to animals or watercraft to which this policy applies, any person or organization legally responsible for these animals or watercraft which are owned by you or any person included in 3a. or 3b. A person or organization using or having custody of these animals or watercraft in the course of any business, or without consent of the owner is not an Insured; and
 - d. with respect to any vehicle to which this policy applies:
 - (1) persons while engaged in your employ or that of any person included in 3a. or 3b. above; or
 - (2) other persons using the vehicle on an "insured location" with your consent.
- 4. "Insured location" means:
 - a. the residence premises; and
 - b. that part of any other premises, other structures and grounds, used by you as a residence and which is shown in the Declarations or which is acquired by you during the policy period for your use as a residence; and
 - c. any premises used by you in connection with the premises included in 4a. or 4b.; and
 - d. any part of a premises not owned by any "Insured" but where any "Insured" is temporarily residing; and
 - e. vacant land, other than farm land, owned by or rented to an "Insured"; and
 - f. land owned by or rented to any "Insured" on which a one or two family dwelling is being constructed as a residence for an "Insured"; and

- g. individual or family cemetery plots or burial vaults of an "Insured"; and
 - h. any part of a premises occasionally rented to any "Insured" for other than business purposes.
5. "Occurrence" means an accident, including continuous or repeated exposure to conditions, which results during the policy period, in:
- a. "bodily Injury"; or
 - b. "property damage"; or
 - c. "personal injury".
6. "Personal Injury" means injury other than "bodily injury", arising out of one or more of the following offenses:
- a. false arrest, detention or imprisonment;
 - b. malicious prosecution;
 - c. the wrongful eviction from, wrongful entry into, or invasion of the right of private occupancy of a room, dwelling or premises that a person occupies by or on behalf of its owner, landlord or lessor;
 - d. oral or written publication of material that slanders or libels a person or organization including other forms of defamation; or
 - e. oral or written publication of material including other forms of defamation that violates a person's right of privacy.
7. "Property damage" means physical injury to, destruction of, or loss of use of tangible property.
8. "Residence employee" means:
- a. an employee of an Insured whose duties are related to maintenance or use of the residence premises, including household or domestic services; or
 - b. one who performs similar duties elsewhere not related to the business of an Insured.
9. "Residence premises" means a one to four family dwelling, other structures and grounds or that part of any other building where you reside and which is shown as the "residence premises" in the Declarations.

CONDITIONS

1. Limit of Liability

Regardless of the number of Insureds, claims made, or persons injured, total liability under Coverage L stated in this policy for all damages resulting from any one "occurrence" shall not exceed the limit of liability for Coverage L stated in the policy. The limit is the same regardless of the number of "Insureds", claims made or persons injured.

Our total liability under Coverage M for all medical expense payable for bodily injury to one person as the result of one accident will not exceed the limit of liability for Coverage M stated in this policy.

2. Severability of Insurance

This insurance applies separately to each "Insured". This condition will not increase our limit of liability for any one "occurrence".

3. Duties after Loss

In case of an accident or "occurrence", the "Insured" will perform the following duties that apply. You will help us by seeing that these duties are performed:

- a. give written notice to us or our agent as soon as practicable, which sets forth:
 - (1) the identity of the policy and "Insured"; and
 - (2) reasonably available information as to the time, place and circumstances of the accident or "occurrence"; and
 - (3) names and addresses of any claimants and witnesses;

- b. promptly forward to us every notice, demand, summons or other process relating to the accident or "occurrence"; and
 - c. at our request, help us:
 - (1) to make settlement; and
 - (2) to enforce any right of contribution or indemnity against any person or organization who may be liable to an "Insured"; and
 - (3) with the conduct of suits and attend hearings and trials; and
 - (4) to secure and give evidence and obtain the attendance of witnesses.
 - d. under the coverage "Damage to the Property of Others" submit to us within 60 days after the loss, a sworn statement of loss and exhibit the damaged property, if within the "Insured's" control; and
 - e. the "Insured" will not, except at the "Insured's" own cost, voluntarily make any payment, assume any obligation or incur any expense other than for first aid to others at the time of the "bodily injury".
4. Duties of an Injured Person-Coverage M - Medical Payments to Others
- The injured person or someone acting for the injured person will:
- a. give us written proof of claim, under oath if required, as soon as is practical; and
 - b. execute authorization to allow us to obtain copies of medical reports and records; and
 - c. the injured person will submit to physical examination by a physician selected by us when and as often as we reasonably require.
5. Payment of Claim - Coverage M - Medical Payments to Others
- Payment under this coverage is not an admission of liability by any "Insured" or us.
6. Suit Against Us
- No action shall be brought against us unless there has been compliance with the policy provisions.
- No one will have any right to join us as a party to any action against an "Insured". Also, no action with respect to Coverage L will be brought against us until the obligation of the "Insured" has been determined by final judgment or agreement signed by us.
7. Bankruptcy of any "Insured"
- Bankruptcy or insolvency of an "Insured" will not relieve us of any of our obligations under this policy.
8. Other Insurance - Coverage L - Personal Liability
- This insurance is excess over any other valid and collectible insurance except insurance written specifically to cover as excess over the limits of liability that apply in this policy.
9. Policy Period
- This insurance applies only to "bodily injury" or "property damage" which occurs on and after the policy effective date and during the policy term.
11. Concealment or Fraud.
- We do not provide coverage for an "Insured" who has:
- a. intentionally concealed or misrepresented any material fact or circumstance; or
 - b. made false statements or engaged in fraudulent conduct relating to this insurance.
12. Waiver or Change of Policy Provisions
- A waiver or change of any provision of this policy must be in writing by us to be valid. Our request for an appraisal or examination shall not waive any of our rights.
13. Assignment
- Assignment of this policy shall not be valid unless we give our written consent.
14. Death
- If you or any member of your household dies while a resident of your household, we insure:

- a. the legal representative of the deceased but only with respect to the premises or property covered under this policy at the time of death; and
- b. with respect to your property, the person having proper temporary custody of the property until appointment and qualification of a legal representative has occurred.

15. Cancellation

- a. You may cancel this policy at any time by returning it to us or by notifying us in writing of the date cancellation is to take effect.
- b. We may cancel this policy by notifying you at least 10 days before the date cancellation takes effect. This cancellation notice may be delivered to you, or mailed to you at your mailing address in the Declarations. Proof of mailing shall be sufficient proof of notice.
- c. If this policy is canceled, the premium for the period from the date of cancellation to the expiration date will be refunded as follows:

If you request cancellation, the return premium will be based on our short rate rules; if we cancel, the return premium will be pro rata.

If the return premium is not refunded with the notice of cancellation or when this policy is returned to us, we will refund it within a reasonable time after the date cancellation takes effect.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PERSONAL LIABILITY SCHEDULE

This endorsement modifies insurance provided under the following:

This insurance afforded by this endorsement shall apply as indicted below, subject to the terms and conditions of the policy that apply.

Insured Schedule:

Coverages		Limits of Liability	Premium
L – Personal Liability	Each Occurrence		
M – Medical Payments	Each Person		

Additional Exposures	Exposure Units	Premium
Each full time In-Servant		
Each full time Out-Servant		
Each Additional Owned Dwelling over 1		
Watercraft Each Additional Non-Powered Sailing Craft Under 26 feet Each Additional powered watercraft under 25 H.P. Each Additional powered watercraft under 50 H.P.		
Offices on premises of insured's residence		
Duplex		
Triplex		
Fourplex		
Vacant Land: Up to 5 acres Over 5 up to 30 acres Over 30 up to 100 acres		
Other:		
Total Premium		

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICY CHANGES

Policy Number: Named Insured:	Effective Date of Change: Change Endorsement No.:		
<p>The following item(s):</p> <table style="width: 100%; border: none;"><tr><td style="width: 50%; vertical-align: top;"><input type="checkbox"/> Insured's Name <input type="checkbox"/> Policy Number <input type="checkbox"/> Effective/Expiration Date <input type="checkbox"/> Payment Plan <input type="checkbox"/> Additional Interested Parties: <input type="checkbox"/> Limits/Exposures <input type="checkbox"/> Covered Property/Located Description <input type="checkbox"/> Rates</td><td style="width: 50%; vertical-align: top;"><input type="checkbox"/> Insured's Mailing Address <input type="checkbox"/> Company <input type="checkbox"/> Insured's Legal Status/Business of Insured <input type="checkbox"/> Premium Determination <input type="checkbox"/> Coverage Forms and Endorsements <input type="checkbox"/> Self-Insured Retention <input type="checkbox"/> Classification/Class Codes <input type="checkbox"/> Underlying Insurance</td></tr></table>		<input type="checkbox"/> Insured's Name <input type="checkbox"/> Policy Number <input type="checkbox"/> Effective/Expiration Date <input type="checkbox"/> Payment Plan <input type="checkbox"/> Additional Interested Parties: <input type="checkbox"/> Limits/Exposures <input type="checkbox"/> Covered Property/Located Description <input type="checkbox"/> Rates	<input type="checkbox"/> Insured's Mailing Address <input type="checkbox"/> Company <input type="checkbox"/> Insured's Legal Status/Business of Insured <input type="checkbox"/> Premium Determination <input type="checkbox"/> Coverage Forms and Endorsements <input type="checkbox"/> Self-Insured Retention <input type="checkbox"/> Classification/Class Codes <input type="checkbox"/> Underlying Insurance
<input type="checkbox"/> Insured's Name <input type="checkbox"/> Policy Number <input type="checkbox"/> Effective/Expiration Date <input type="checkbox"/> Payment Plan <input type="checkbox"/> Additional Interested Parties: <input type="checkbox"/> Limits/Exposures <input type="checkbox"/> Covered Property/Located Description <input type="checkbox"/> Rates	<input type="checkbox"/> Insured's Mailing Address <input type="checkbox"/> Company <input type="checkbox"/> Insured's Legal Status/Business of Insured <input type="checkbox"/> Premium Determination <input type="checkbox"/> Coverage Forms and Endorsements <input type="checkbox"/> Self-Insured Retention <input type="checkbox"/> Classification/Class Codes <input type="checkbox"/> Underlying Insurance		
<p>is (are) changed to read:</p> <div style="text-align: right; margin-top: 100px;"><input type="checkbox"/> Policy Changes continued on page NAS-AB-PC2.</div>			
<p>The above amendments result in a change in the premium as follows:</p>			
<input type="checkbox"/> NO CHANGES	<input type="checkbox"/> TO BE ADJUSTED AT AUDIT	ADDITIONAL MIUM \$	PRE- RETURN PREMIUM \$

(Authorized Representative)

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COVERED PRODUCTION LIMITATION ENDORSEMENT

This endorsement modifies insurance provided under the following:

This insurance applies only to a "covered production".

"Covered production" means:

- a. All productions filmed, videotaped, created or computer generated by you, and
- b. Productions with shooting periods not more than days, and
- c. Productions with "gross production costs" not more than , or
- d. Productions scheduled or endorsed on this policy.

The following is/are not a "covered production":

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

FINAL AUDIT

This endorsement modifies insurance provided under the following:

The final Audited Earned Premium for the Policy Period from to is calculated as follows:

Premium Basis:

Audited Premium Basis:

Estimated Premium Basis:

Audited Earned Premium (subject to Rating Schedule and the
Minimum Premium of \$): \$

Endorsements and Additional Premiums: \$

Less the Deposit Premium shown on the Rating Schedule: \$

Subtotal: \$

State Assessment Charges: \$

Additional or Return Premium (subject to the Minimum
Premium of \$): \$

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

MINIMUM PREMIUM ENDORSEMENT

This endorsement modifies insurance provided under the following:

☐ The Total Policy Premium, including subsequent policy changes, is the Minimum Premium and is fully earned.

☐ The Minimum Premium for this policy is:
25% of the Total Policy Premium, including subsequent policy changes, except for the following Coverage(s):
;

The Total Policy Premium, including subsequent policy changes for Coverage(s) noted above is Flat, 100% fully earned.

☐ The Minimum Premium for this policy is \$

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NON-INSURED PRODUCTION ENTITY CONDITIONAL EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal and advertising injury", direct or indirect loss or damage arising out of, resulting from, or otherwise relating in whole or in part to any arrangement between any insured and a "non-insured production entity" whereby the "non-insured production entity" enters into an agreement with any insured to provide "services" for a fee or other consideration.

For purposes of this endorsement:

1. A "non-insured production entity" means any entity that does not maintain a separate policy of insurance, other than this policy, that applies to a production out of which a claim, loss or "suit" arises, equal to or greater than the types of insurance and limits provided by this policy.
2. "Services" means:
 - a. Providing access to equipment rental entities, and/or
 - b. Providing insurance to a "non-insured production entity" under this policy without our prior written consent.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE OF FEATURE FILM PRODUCTIONS

This endorsement modifies insurance provided under the following:

The insurance afforded by this policy applies only to Feature Films scheduled below, or by an endorsement to this policy:

#	Production/Event Name & Type	Budget	Country(s)	Start/End Dates	Coverages
----------	---	---------------	-------------------	------------------------	------------------

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

UNSCHEDULED PRODUCTION, PRESENTATION OR EVENT EXCLUSION

This endorsement modifies insurance provided under the following:

This policy does not apply to "bodily injury", "property damage", "personal and advertising injury", direct or indirect loss or damage arising out of or resulting from or otherwise relating in whole or in part to any activity associated with any production, presentation or event unless specifically declared, accepted by us and endorsed on the policy.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE OF EVENTS

This endorsement modifies insurance provided under the following:

The insurance afforded by this policy applies only to an Insured Event scheduled below, or by an endorsement to this policy:

#	Event Name & Type	Attendance	Start/End Dates	Coverages	Rate / Premium
----------	------------------------------	-------------------	------------------------	------------------	-----------------------

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE OF PRODUCTIONS

This endorsement modifies insurance provided under the following:

The insurance afforded by this policy applies only to an Insured Production scheduled below, or by an endorsement to this policy:

#	Production Name & Type	Budget	Country(s)	Start/End Dates	Coverages
----------	-----------------------------------	---------------	-------------------	------------------------	------------------

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE OF COVERED STUNT ACTIVITIES

This endorsement modifies insurance provided under the following:

SCHEDULE

Description of Stunt Activity	Description of Production/Scene	Production/Scene Dates	Rate	Premium

When a stunt, animal or pyrotechnic activity is described in the above Schedule and the corresponding premium has been paid, the applicable exclusion in the Exclusion endorsement is deleted.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SPECIFIED PRODUCTION DATES

This endorsement modifies insurance provided under the following:

We do not pay for loss of or damage to Covered Property during the policy period shown on the Declarations page resulting from any activity relating to any event, production or presentation, unless such loss or damage is a Covered Cause of Loss for the Coverage(s) and on the Date(s) shown below.

Coverage:	Date(s)
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All dates begin at 12:01 A.M. Standard Time at the Address of the Insured shown on the Declarations page or on an Endorsement attached hereto.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
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MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

VENUE RATING SCHEDULE

This endorsement modifies insurance provided under the following:

Event Liability Rate Schedule

Category	Rating Basis	Rate
Admissions	Per Attendee	\$
Concessions (premises/operations)	Per \$1,000 Sales	\$
Concessions (products/completed operations)	Per \$1,000 Sales	\$
Liquor Liability	Per \$1,000 Sales	\$

Vendors Liability Rate Schedule (Applies per event and in addition to the above premiums)

Vendor Type	Flat Rate per Vendor per Event
City/Special Certificates	\$
Waiver of Subrogation/primary wording	\$
Exhibitors (No Sales)	\$ per day/per exhibitor up to a maximum of \$ per day
Attractions (Performers)	\$ per day/per attraction up to a maximum of \$ per day
Concessionaires/Vendors (Food/Beverage Sales)	\$ per day/per vendor up to a maximum of \$ per day
Concessionaires/Vendors (Non Food/Beverage Sales)	\$ per day/per vendor up to a maximum of \$ per day

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LESSEE CONDITIONAL EXCLUSION

This endorsement modifies insurance provided under the following:

The following exclusion is added to **SECTION 1—COVERAGES, COVERAGE A – BODILY INJURY AND PROPERTY DAMAGE LIABILITY** paragraph 2. Exclusions and **COVERAGE B – PERSONAL AND ADVERTISING INJURY LIABILITY** paragraph 2. Exclusions:

This insurance does not apply to “bodily injury”, “property damage” or “personal and advertising injury” arising out of, resulting from, or otherwise relating in whole or in part to the acts of a lessee unless the following conditions have been met.

You have procured and maintained the following:

1. Written agreement with the lessee indemnifying and holding you harmless for “bodily injury”, “property damage” or “personal and advertising injury” sustained by a third person; and
2. Written agreement with each lessee indemnifying and holding you harmless for “bodily injury”, “property damage” or “personal and advertising injury” arising from injuries to that lessee and/or its employees; and
3. Written agreement with each lessee waiving all rights against you and/or your agents and employees; and
4. Certificates of Insurance from each lessee evidencing the following coverage and minimum Limits of Liability:

Commercial General Liability coverage with an insurance carrier rated A- or better by A. M. Best

\$1,000,000 Combined Single Limit each occurrence

\$1,000,000 General Aggregate

\$1,000,000 Products/Completed Operations Aggregate

5. You have been named as an additional insured on each lessee’s Commercial General Liability policy.

All other terms and conditions of this policy remain unchanged.

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MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMITED AIRCRAFT COVERAGE ENDORSEMENT

This endorsement modifies insurance provided under the following:

SECTION 1- COVERAGES, COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. EXCLUSIONS, g. is amended to add the following:

This exclusion does not apply to:

Stationary aircraft used as a set or prop while being used as part of a performance, production or event.

All other terms and conditions of this policy remain unchanged.

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MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NEWLY ACQUIRED OR FORMED ENTITY EXCLUSION

This endorsement modifies insurance provided under the following:

SECTION II—WHO IS AN INSURED paragraph 3. a., b., and c. which read as follows are deleted in their entirety;

- a. Coverage under this provision is afforded only until the 90th day after you acquire or form the organization or the end of the policy period, whichever is earlier;
- b. Coverage **A** does not apply to "bodily injury" or "property damage" that occurred before you acquired or formed the organization; and
- c. Coverage **B** does not apply to "personal and advertising injury" arising out of an offense committed before you acquired or formed the organization.

All other terms and conditions of this policy remain unchanged.

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Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PROMOTERS RATING SCHEDULE

This endorsement modifies insurance provided under the following:

Event Liability Rate Schedule

Type of Events	Rate per Admission/Attendee per Event
Concerts (other than rap/hip-hop)	\$
Concerts (rap/hip-hop)	\$
Trade Shows	\$
Festivals (no camping, no music)	\$
Festivals (camping, no music)	\$
Festivals (camping, music)	\$
Other Eligible Events	\$

Vendors Liability Rate Schedule (Applies per event and in addition to the above premiums)

Vendor Type	Flat Rate per Vendor per Event
Bands, Lighting, Staging Companies	\$
Sponsors	\$
Co-Promoters	Greater of \$ or % of event premium
City/Special Certificates	\$
Waiver of Subrogation/primary wording	\$
Exhibitors (No Sales)	\$ per day/per exhibitor up to a maximum of \$ per day
Attractions (Performers)	\$ per day/per attraction up to a maximum of \$ per day
Concessionaires/Vendors (Food/Beverage Sales)	\$ per day/per vendor up to a maximum of \$ per day
Concessionaires/Vendors (Non Food/Beverage Sales)	\$ per day/per vendor up to a maximum of \$ per day

All other terms and conditions of this policy remain unchanged.

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MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PROMOTION LIMITATION ENDORSEMENT

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal injury", or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to "promotional activities" unless specifically declared, accepted by us and endorsed on the policy.

For purposes of this endorsement "promotional activities" include any activity intended to provide awareness of your product(s) or event(s) including, but not limited to:

Autographing of book(s) or media;
Radio, television, internet or other appearances; or
Private or guest performances.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PROPERTY DAMAGE TO RENTED PREMISES EXCLUSION

This endorsement modifies insurance provided under the following:

SECTION 1- COVERAGES, COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY paragraph 2. **EXCLUSIONS**, j. is deleted in its entirety and replaced by the following:

j. Damage To Property

"Property damage" to:

- (1) Property you own, rent, or occupy, including any costs or expenses incurred by you, or any other person, organization or entity, for repair, replacement, enhancement, restoration or maintenance of such property for any reason, including prevention of injury to a person or damage to another's property;
- (2) Premises you sell, give away or abandon, if the "property damage" arises out of any part of those premises;
- (3) Property loaned to you;
- (4) Personal property in the care, custody or control of the insured;
- (5) That particular part of real property on which you or any contractors or subcontractors working directly or indirectly on your behalf are performing operations, if the "property damage" arises out of those operations; or
- (6) That particular part of any property that must be restored, repaired or replaced because "your work" was incorrectly performed on it.

Paragraph (2) of this exclusion does not apply if the premises are "your work" and were never occupied, rented or held for rental by you.

Paragraphs (3), (4), (5) and (6) of this exclusion do not apply to liability assumed under a sidetrack agreement.

Paragraph (6) of this exclusion does not apply to "property damage" included in the "products-completed operations hazard".

All other terms and conditions of this policy remain unchanged.

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MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

TOTAL POLLUTION EXCLUSION ENDORSEMENT

This endorsement modifies insurance provided under the following:

Section I. COVERAGES A, 2. Exclusions, f., COVERAGE B. 2. Exclusions, n, and Section V-Definitions, 15. of the Commercial General Liability Coverage Form are deleted in their entirety and replaced by the following:

This insurance does not apply to:

- (1) "Bodily injury", "property damage", "personal injury" or "personal and advertising injury" which would not have occurred in whole or part but for the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of "pollutants" at any time.
- (2) Any loss, cost or expense arising out of any:
 - (a) Request, demand, order or statutory or regulatory requirement that any insured or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of "pollutants"; or
 - (b) Claim or suit by or on behalf of a governmental authority or others for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to, or assessing the effects of "pollutants."

For purposes of this endorsement, "Pollutants" mean any solid, liquid, gaseous, thermal, acoustic, electric, magnetic or electromagnetic irritant or contaminant. "Pollutants" include, but are not limited to, smoke, vapor, soot, dusts, spore(s), fumes, fibers, radiation, acid(s), alkalis, chemicals and waste. Waste includes materials to be recycled, reconditioned or reclaimed.

All other terms and conditions of this policy remain unchanged.

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MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

TULIP RATING SCHEDULE

This endorsement modifies insurance provided under the following:

Event Liability Rate Schedule (not including Vendors Liability)

Rates for single events, recurring events up to 4 days, and recurring events with more than 5,000 total attendees:

Daily Attendance (Spectators/Participants)	Event Class I	Event Class II	Event Class III	Event Class IV	Liquor Liability
Flat rate per event per day based on daily attendance					
1 – 100					
101 – 500					
501 – 1,500					
1,501 – 3,000					
3,001 – 5,000					
Rate per attendee per Event when daily attendance exceeds 5,000					
Over 5,000					

Rates for recurring events of 5 or more days and up to 5,000 total attendees:

Attendance (Spectators/Participants)	Event Class I	Event Class II	Event Class III	Event Class IV	Liquor Liability
Flat rate for total attendance					
1 – 100					
101 – 500					
501 – 1,500					
1,501 – 3,000					
3,001 – 5,000					

A recurring event is an event that takes place on a regular basis at the same location.

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Vendors Liability Rate Schedule (Applies per event and in addition to the above premiums)

Vendor Type	Flat Rate per Vendor per Event
City/Special Certificates	\$
Waiver of Subrogation/primary wording	\$
Exhibitors (No Sales)	\$ per day/per exhibitor up to a maximum of \$ per day
Attractions (Performers)	\$ per day/per attraction up to a maximum of \$ per day
Concessionaires/Vendors (Food/Beverage Sales)	\$ per day/per vendor up to a maximum of \$ per day
Concessionaires/Vendors (Non Food/Beverage Sales)	\$ per day/per vendor up to a maximum of \$ per day

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EMPLOYMENT-RELATED PRACTICES EXCLUSION

This endorsement modifies insurance provided under the following:

A. The following exclusion is added to Paragraph 2., Exclusions of Coverage L – Bodily Injury And Property Damage Liability of the Comprehensive Personal Liability Coverage Form:

This insurance does not apply to:

"Bodily injury" to:

(1) A person arising out of any:

- (a)** Refusal to employ that person;
- (b)** Termination of that person's employment; or
- (c)** Employment-related practices, policies, acts or omissions, such as coercion, demotion, evaluation, reassignment, discipline, defamation, harassment, humiliation, discrimination or malicious prosecution directed at that person; or

(2) The spouse, child, parent, brother or sister of that person as a consequence of "bodily injury" to that person at whom any of the employment-related practices described in Paragraphs (a), (b), or (c) above is directed.

This exclusion applies:

- (1)** Whether the injury-causing event described in Paragraphs (a), (b) or (c) above occurs before employment, during employment or after employment of that person;
- (2)** Whether the insured may be liable as an employer or in any other capacity; and
- (3)** To any obligation to share damages with or repay someone else who must pay damages because of the injury.

B. The following exclusion is added to Paragraph 2., Exclusions of Coverage L – Personal Injury Liability of the Comprehensive Personal Liability Coverage Form:

This insurance does not apply to:

"Personal injury" to:

(1) A person arising out of any:

- (a)** Refusal to employ that person;
- (b)** Termination of that person's employment; or
- (c)** Employment-related practices, policies, acts or omissions, such as coercion, demotion, evaluation, reassignment, discipline, defamation, harassment, humiliation, discrimination or malicious prosecution directed at that person; or

(2) The spouse, child, parent, brother or sister of that person as a consequence of "personal injury" to that person at whom any of the employment-related practices described in Paragraphs (a), (b), or (c) above is directed.

This exclusion applies:

- (1)** Whether the injury-causing event described in Paragraphs (a), (b) or (c) above occurs before employment, during employment or after employment of that person;
- (2)** Whether the insured may be liable as an employer or in any other capacity; and
- (3)** To any obligation to share damages with or repay someone else who must pay damages because of the injury.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

TOTAL POLLUTION EXCLUSION ENDORSEMENT

This endorsement modifies insurance provided under the following:

This insurance does not apply to:

- (1) "Bodily injury", "property damage", or "personal injury" which would not have occurred in whole or part but for the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of "pollutants" at any time.
- (2) Any loss, cost or expense arising out of any:
 - (a) Request, demand, order or statutory or regulatory requirement that any insured or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of "pollutants"; or
 - (b) Claim or suit by or on behalf of a governmental authority or others for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to, or assessing the effects of "pollutants."

For purposes of this endorsement, "Pollutants" mean any solid, liquid, gaseous, thermal, acoustic, electric, magnetic or electromagnetic irritant or contaminant. "Pollutants" include, but are not limited to, smoke, vapor, soot, dusts, spore(s), fumes, fibers, radiation, acid(s), alkalis, chemicals and waste. Waste includes materials to be recycled, reconditioned or reclaimed.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WORKERS' COMPENSATION Residence Employees

This endorsement modifies insurance provided under the following:

Personal Liability, Coverage L.

We agree, with respect to "residence employee(s)":

Part One - Workers' Compensation Insurance

To pay when due all benefits required of the "Insured" by the Workers' Compensation Law of the applicable jurisdiction to a "residence employee", and;

Part Two - Employers' Liability Insurance

To pay on behalf of the Named Insured shown in the Personal Liability Schedule all damages for which the Named Insured is legally liable because of "bodily injury" sustained by a "residence employee". The "bodily injury" must be caused by accident or disease and arising out of and in the course of employment by an "insured" while:

1. In the United States of America, its territories or possessions, or Canada, or
2. Temporarily elsewhere if the residence employee is a citizen or resident of the United States or Canada.

Part Two does not apply to any suit brought or judgment rendered by any court outside the United States of America, its territories and possessions, or Canada, or to any action on such judgment.

Additional Provisions Applicable to Part One

The following provisions are applicable to Part One:

1. We shall be directly and primarily liable to any "residence employee" of an "Insured" entitled to the benefits of the applicable Workers' Compensation Law.
2. As between the "residence employee" and us, notice to or knowledge of the "occurrence" of the injury on the part of the "Insured" is deemed notice or knowledge on our part.
3. The jurisdiction of an "Insured" will be subject to the provisions of the law imposing liability for compensation.

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4. We will be subject to the orders, findings, decisions or awards rendered against an "Insured", under the provisions of the law imposing liability for compensation, subject to the provisions, conditions and limitations of this insurance. This insurance shall govern as between an "Insured" and us as to payments by either in discharge of an "Insured's" liability for compensation.
5. The "residence employee" has a first lien upon any amount which we owe you on account of this insurance. In case of your legal incapacity or inability to receive the money and pay it to the "residence employee", we will pay it directly to the "residence employee". Your obligation to the residence employee is discharged to the extent of such payment.

Limits of Liability Part Two

Our total limit of liability will not exceed \$100,000 for all damages because of "bodily injury":

1. Sustained by one or more "residence employee" in any one "occurrence"; or
2. Caused by disease and sustained by a "residence employee".

Our total limit of liability will not exceed \$500,000 for all damages arising out of "bodily injury" by disease regardless of the number of "residence employee(s)" who sustain "bodily injury" by disease.

Application of Coverage

Additional Provisions Applicable to Part Two

This insurance applies only to "bodily injury" which occurs during the policy period. If the "bodily injury" is a disease, it must be caused or aggravated by the condition(s) of the "residence employee's" employment by the "Insured".

The following additional provisions apply to **Part One** and **Part Two**:

1. For purpose of this endorsement, the following is added to **COMPREHENSIVE PERSONAL LIABILITY COVERAGE, Definitions**, paragraph 8. "residence employee":

A "residence employee" is covered if during the 90 calendar days immediately before the date of injury the "residence employee" has:

- a. Actually been engaged in such employment by the "Insured" for no less than 52 hours, and
 - b. Earned no less than one hundred dollars (\$100) in wages.
2. This insurance does not apply to any loss to which other valid and collectible Workers' Compensation or Employers' Liability insurance applies.
 3. Terms of this insurance which are in conflict with the applicable Workers' Compensation Law are amended to conform to that law.

Exclusions

This insurance does not apply:

1. To liability for additional compensation imposed on an "Insured" because of the serious and willful misconduct of any "Insured", or because of "bodily injury" to a "residence employee" under 16 years of age and illegally employed at the time of injury;

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2. To liability for "bodily injury" arising out of business pursuits of an "Insured".
3. The following apply to Part Two:
 - a. To liability assumed by any "Insured" under any contract or agreement.
 - b. To "bodily injury" by disease unless written claim is made to the "Insured" or suit brought against the "Insured" within 36 months after the end of the Policy Period.
 - c. To any obligation under a Workers' Compensation, unemployment or disability benefits law.

All other terms and conditions of this policy remain unchanged.

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Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CONCESSIONAIRE/EXHIBITOR RATE ENDORSEMENT

This endorsement modifies insurance provided under the following:

Exhibitors - No Sales	Per Day - Per Exhibitor
Concessionaire - Non Food Sales	Per Day - Per Concessionaire
Concessionaire - Food Sales	Per Day - Per Concessionaire

Products Liability Coverage is excluded on all vendors, concessionaires, and exhibitors of "Non-Food" Sales and demonstrations.

All other terms and conditions of this policy remain unchanged.

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Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CONDITION – PERIODIC REPORTING

This endorsement modifies insurance provided under the following:

SCHEDULE

Period Number	Reporting Period	Due Date
<hr/>		

All events insured by this policy which occurred during the Reporting Period shown in the Schedule must be reported to us on a Reporting Form no later than the Due Date shown in the Schedule. Failure to report by the Due Date will be considered non-payment of premium and will be subject to the cancellation provisions contained elsewhere in this policy.

All other terms and conditions of this policy remain unchanged.

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Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PREMIUM RATE SCHEDULE

This endorsement modifies insurance provided under the following:

The premium earned hereunder shall be subject to an audit, upon our request. The Earned Premium shall be determined in accordance with rates shown below, applied against your incurred "Gross Production Costs" during the policy period.

Rate per \$100 of "Gross Production Costs":

A.	\$ _____	For the first	\$ _____
B.	\$ _____	For the next	\$ _____
C.	\$ _____	For the next	\$ _____
D.	\$ _____	For the next	\$ _____
E.	\$ _____	For the next	\$ _____
F.	\$ _____	Over	\$ _____

You have estimated your total "Gross Production Costs" to be: \$ _____

Deposit Premium (Based on "Gross Production Costs"): \$ _____

Subject to an Annual Minimum Premium of: \$ _____

Additional Premium: \$ _____

Total Policy Premium: \$ _____

Definition: "Gross Production Costs" shall mean all costs incurred by you during the Policy Period, except:

- A.** Those administrative costs not directly related to a production.
- B.** Other costs endorsed hereon.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS OR LESSEES
SCHEDULED PERSON OR ORGANIZATION
CO-PRIMARY ENDORSEMENT**

This endorsement modifies insurance provided under the following:

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

- A. **Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
1. Your acts or omissions; or
 2. The acts or omissions of those acting on your behalf;
- in the performance of your ongoing operations.
- B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:
- This insurance does not apply to "bodily injury" or "property damage" occurring after:
1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS OR LESSEES
SCHEDULED PERSON OR ORGANIZATION
EXCESS ENDORSEMENT**

This endorsement modifies insurance provided under the following:

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

- A. **Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
1. Your acts or omissions; or
 2. The acts or omissions of those acting on your behalf;
- in the performance of your ongoing operations.
- B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:
- This insurance does not apply to "bodily injury" or "property damage" occurring after:
1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
- C. Our duty to defend and indemnify an Additional Insured seeking coverage pursuant to this Additional Insured Endorsement is excess over any insurance which identifies the Additional Insured as an insured or additional insured. This provision applies regardless of any applicable deductibles or self-insured retention that the additional insured may owe to any other insurer.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS OR LESSEES
SCHEDULED PERSON OR ORGANIZATION
PRIMARY AND NONCONTRIBUTORY ENDORSEMENT**

This endorsement modifies insurance provided under the following:

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

- A. **Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
1. Your acts or omissions; or
 2. The acts or omissions of those acting on your behalf;
- in the performance of your ongoing operations.
- B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:
- This insurance does not apply to "bodily injury" or "property damage" occurring after:
1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 2. That portion of "your work" out of which the injury or damage arises has been put to its intended

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ASSAULT AND BATTERY EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to:

1. The assault or battery by any insured, or
2. The negligent:
 - a. Employment;
 - b. Investigation;
 - c. Supervision;
 - d. Reporting to the proper authorities, or failure to so report; or
 - e. Retention;

of a person for whom any insured is or ever was legally responsible and whose conduct would be excluded by paragraph 1. above.

All other terms and conditions of this policy remain unchanged.

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Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

INFORMATIONAL CONTENT EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal injury" or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to any advice, suggestions, directions or instructions disseminated by any insured through any media or device.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**INJURY TO PARTICIPANTS IN
SPORTS OR ATHLETIC ACTIVITIES EXCLUSION**

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to any person while practicing, instructing or participating in any sport or athletic activities.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**LIBEL, SLANDER, RIGHT TO PRIVACY, ADVERTISING IDEA, COPYRIGHT,
TRADE DRESS AND SLOGAN EXCLUSION**

This endorsement modifies insurance provided under the following:

The following exclusion is added to **SECTION 1—COVERAGES, COVERAGE B – PERSONAL AND ADVERTISING INJURY LIABILITY** paragraph 2. **Exclusions:**

This insurance does not apply to “personal and advertising Injury” arising out of:

- d. Oral or written publication, in any manner, of material that slanders or libels a person or organization or disparages a person’s or organizations’ goods, products or services;
- e. Oral or written publication, in any manner, of material that violates a person’s right of privacy;
- f. The use of another’s advertising idea in your “advertisement”; or
- g. Infringing upon another’s copyright, trade dress or slogan in your “advertisement”.

SECTION V. – DEFINITIONS, 14. “Personal and advertising Injury”, paragraphs d., e., f., and g. are deleted in their entirety.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**LIMITED ADDITIONAL INSURED –
ATTRACTIONS, EXHIBITORS, FOOD OR NON-FOOD CONCESSIONAIRES**

This endorsement modifies insurance provided under the following:

SCHEDULE

Scheduled Event:	
-------------------------	--

When checked below, **WHO IS AN INSURED (Section II)** is amended to include as an insured the "attraction", "exhibitor", "food concessionaire" or "non-food concessionaire(s)" but only with respect to liability arising out of the Additional Insured's operations and arising out of an event shown in the schedule above.

For purposes of this endorsement, the following are defined terms:

- ☐ **"Attraction(s)"** means an entity that provides entertainment at the event scheduled above.
- ☐ **"Exhibitor(s)"** means an entity that exhibits or demonstrates but does not sell products at the event scheduled above.
- ☐ **"Food Concessionaire(s)"** means an entity that sells food products at the event scheduled above.
- ☐ **"Non-Food Concessionaire(s)"** means an entity that sells other than food products at the event scheduled above.

Our duty to defend and indemnify an Additional Insured seeking coverage pursuant to this Additional Insured Endorsement is excess over any insurance which identifies the Additional Insured as an insured or additional insured. This provision applies regardless of any applicable deductibles or self-insured retention that the additional insured may owe to any other insurer.

The following entities are not an Additional Insured(s) under our policy:

Schedule

Ineligible "attraction(s)", "exhibitor(s)", "food concessionaire(s)" and "non-food concessionaire(s)":

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

MOSHING EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal injury" or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to "moshing".

For purposes of this exclusion, "moshing" includes, but is not limited to, the activity of pushing, slamming, diving, crowd-diving, head-banging or crowd surfing at a performance.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NON-PERFORMING ANIMAL EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal and advertising injury", direct or indirect loss or damage arising out of, resulting from, or otherwise relating in whole or in part to a "non-performing animal".

For purposes of this endorsement, "non-performing animal" includes:

The actions or presence of any animal.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

RAP AND HIP-HOP CONDITIONAL EXCLUSION

This endorsement modifies insurance provided under the following:

This policy does not apply to "bodily injury", "property damage", "personal and advertising injury", direct or indirect loss or damage arising out of or resulting from or otherwise relating in whole or in part to any performance, production or event which include live performance(s) of rap or hip-hop music unless specifically declared, accepted by us and endorsed on the policy.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

UNSCHEDULED PRODUCTS LIMITATION ENDORSEMENT

This endorsement modifies insurance provided under the following:

This policy does not apply to "bodily injury", "property damage", "personal and advertising injury" arising out of or resulting from or otherwise relating in whole or in part to the sale of "your products" and/or any goods or products other than real property, manufactured, sold, handled, distributed or disposed of by any Additional Insured. This exclusion does not apply to:

- a. Food and beverage; or
- b. Clothing apparel, records, tapes, discs, posters, badges, photos, stickers and other similar products.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SEATING, GLASS & FIXTURES EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury," "property damage," or "personal and advertising injury" arising out of damage to, destruction of, or loss of use of seating, chairs, benches, bleachers, fixtures, windows, glass doors and structural glass.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SECURITY SERVICE CONDITIONAL LIMITATION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to performances, productions or events that include any independent security service, unless the following conditions have been met.

You have procured and maintained Certificates of Insurance from each security service evidencing the following coverage and minimum Limits of Liability:

1. Commercial General Liability coverage with an insurance carrier rated A- or better by A. M. Best
 - \$ Combined Single Limit each occurrence
 - \$ General Aggregate
 - \$ Products/Completed Operations Aggregate, and
2. You have been named as an additional insured on each security service's Commercial General Liability policy.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ATTENDANCE LIMITATION ENDORSEMENT

This endorsement modifies insurance provided under the following:

This policy does not apply to "bodily injury", "property damage", "personal and advertising injury", direct or indirect loss or damage arising out of or resulting from or otherwise relating in whole or in part to any concert scheduled at a premise with attendance capacity of more than _____ persons, unless specifically declared, accepted by us and endorsed on the policy, prior to the commencement of any of the following events:

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EVENT LIMITATION ENDORSEMENT

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to the following "Events" unless specifically declared, accepted by us and endorsed on the policy, prior to the commencement of any of the following "Events".

For purposes of this endorsement "Events" include:

Circus;
Carnivals;
Motorized sporting events;
Tractor/truck pulls;
Boxing, wrestling, hockey or martial arts activities;
Rodeos or roping events;
Pre-production, production and post-production of any film, television, video or related production activities;
or
Professional sporting events.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**HAZARDOUS ACTIVITIES, PYROTECHNIC &
ANIMAL EXPOSURE EXCLUSION**

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to a "Hazardous Activities", "Pyrotechnic" or "Animal Exposure" not scheduled on this policy.

For purposes of this endorsement "Hazardous Activities" include, but are not limited to:

Body piercing;
The use of aircraft, motorcycles or "mobile equipment" for any purpose;
Racing using any land vehicle or watercraft;
The use of any vehicle designed for recreational use on or off public roads;
Bungee jumping;
Hang gliding;
Hot air ballooning;
Kayaking;
Luge,
Bobsledding,
Tobogganing;
Mountain biking,
Mountain or rock climbing;
Parachuting;
Parasailing;
Playing in or on any bounce house or other inflatable play structure;
The ownership, maintenance or use of any amusement ride or mechanical amusement device;
Scuba diving;
Skateboarding;
Skydiving;
Stage diving;
Tattooing;
The use of trampolines;
The use of guns, knives or projectile devices; or
Activities taking place in or on water.

For purposes of this endorsement, "Pyrotechnics" include:

The use of fireworks, explosives, or pyrotechnic devices.

For purposes of this endorsement, "Animals" include:

The actions or presence of any animal.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIQUOR LIABILITY EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury," "property damage," "personal injury" or "personal and advertising injury" arising out of or resulting from:

1. The intoxication of any person; or
2. The selling, servicing or furnishing of alcoholic beverages to any person, including but not limited to, any person under the legal drinking age or any person under the influence of alcohol; or
3. Violation of any law or regulation applying to the sale, gift, distribution, or use of alcoholic beverages.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**OVERNIGHT, OUTDOOR AND TEMPORARY STRUCTURE
CAMPING CONDITIONAL EXCLUSION**

This endorsement modifies insurance provided under the following:

This policy does not apply to "bodily injury", "property damage", "personal and advertising injury", direct or indirect loss or damage arising out of, resulting from or otherwise relating in whole or in part to any performance, production or event designed to include or result in "Camping" unless specifically declared and endorsed hereon.

For purposes of this endorsement, "Camping" includes, but is not limited to:

- a) the use of a tent, a temporary structure or no shelter at all; and
- b) spending one or more nights at an outdoor impromptu or dedicated area.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**PARTNERSHIP, JOINT VENTURE AND
LIMITED LIABILITY COMPANY EXCLUSION**

This endorsement modifies insurance provided under the following:

The last paragraph of **SECTION II – WHO IS AN INSURED** is deleted in its entirety and replaced with the following:

No person or organization is an insured with respect to the conduct of any current or past partnership, joint venture or limited liability company unless it is shown as a Named Insured in the Declarations and an additional premium has been paid.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

RENTAL RECEIPTS CONDITIONAL ENDORSEMENT

This endorsement modifies insurance provided under the following:

It is hereby understood and agreed that the insured shall procure and maintain the following:

1. Written agreement with the lessee indemnifying and holding you harmless for "bodily injury", "property damage" or "personal and advertising injury" sustained by a third person; and
2. Written agreement with each lessee indemnifying and holding you harmless for "bodily injury", "property damage" or "personal and advertising injury" arising from injuries to that lessee and/or its employees; and
3. Written agreement with each lessee waiving all rights against you and/or your agents and employees; and
4. Certificates of Insurance from each lessee evidencing the following coverage and minimum Limits of Liability:

Commercial General Liability coverage with an insurance carrier rated A- or better by A. M. Best
\$1,000,000 Combined Single Limit each occurrence
\$1,000,000 General Aggregate
\$1,000,000 Products/Completed Operations Aggregate

5. You have been named as an additional insured on each lessee's Commercial General Liability policy.

An additional premium based upon a rate of \$ per \$ of rental receipts will be charged for those rentals which any insured fails to comply with any Items 1. through 5. above. Such additional premium is due and payable within 10 (ten) days of the date of the written demand.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ELIGIBLE CLASSES OF PRODUCTION(S), PRESENTATION(S) OR EVENT(S)
LIMITATION ENDORSEMENT**

This endorsement modifies insurance provided under the following:

This policy does not apply to "bodily injury", "property damage", "personal and advertising injury", direct or indirect loss or damage arising out of or resulting from or otherwise relating in whole or in part to any activity associated with any production, presentation or event unless specifically declared, accepted by us and endorsed on the policy.

This exclusion does not apply to the following categories of production(s), presentation(s) or event(s):

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ABSOLUTE ASBESTOS EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury," "property damage," "personal injury" or "personal and advertising injury" arising out of or resulting from, in whole or in part, to asbestos in any form or quantity including without limitation:

- (a) cost or expense relating to investigation and/or defense of any loss, claim, suit or other proceeding:
- (b) cost or expense relating to request, demand or order that any insured or others test for, monitor, remediate, clean up, remove, contain, treat, detoxify, neutralize or in any way respond to or assess the presence of or the effects of asbestos; and/or
- (c) any fine, penalty or assessment.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ABUSE OR SEXUAL MOLESTATION EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal injury" or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to:

1. The actual or threatened abuse or sexual molestation by any insured, or
2. The negligent:
 - a. Employment;
 - b. Investigation;
 - c. Supervision;
 - d. Reporting to the proper authorities, or failure to so report; or
 - e. Retention;

of a person for whom any insured is or ever was legally responsible and whose conduct would be excluded by paragraph 1. above.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LEAD CONTAMINATION EXCLUSION

This endorsement modifies insurance provided under the following:

This endorsement excludes "occurrences" which result in:

- a. "Bodily injury" arising out of the ingestion, inhalation or absorption of lead in any form;
- b. "Property damage" arising from any form of lead;
- c. "Personal Injury" arising from any form of lead;
- d. "Personal and advertising injury" arising from any form of lead;
- e. Medical expenses arising from any form of lead;
- f. Any loss, cost or expense arising out of any request, demand or order that any insured or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to or assess the effects of lead; or
- g. Any loss, cost or expense arising out of any claim or "suit" by or on behalf of a governmental authority for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to or assessing the effects of lead.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

MEDIA CONTENT EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal injury" or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to any action by a person or a group of people that have or are alleged to have been influenced or directed by the ideas, subject matter, or content of any live, filmed or recorded event, production or presentation whether released or presented theatrically, on television, or through any other media or device.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

THROWING OBJECTS EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal injury" or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to throwing, kicking or launching objects of any kind.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

FUNGUS, MILDEW AND MOLD EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to:

1. "Bodily injury", "property damage", "personal injury" or "personal and advertising injury" arising out of, resulting from, caused by, contributed to, or in any way related to the existence, inhalation or exposure to any "fungus/fungi" and or "spore(s)"; or
2. Any cost or expenses associated in any way, or arising out of the abatement, mitigation, remediation, containment, detoxification, neutralization, monitoring, removal, disposal, or any obligation to investigate or assess the presence or effects of any "fungus/fungi" or "spore(s)"; or
3. Any obligation to share with or repay any person, organization or entity, related in any way to items 1. and 2. above,

regardless of any other cause, event, material, product and/or building component that contributed concurrently or in any sequence to the injury or damage.

For purposes of this endorsement, the following definitions apply:

"Fungus/fungi" includes, but is not limited to, any form or type of mold, mildew, mushroom, yeast, or biocontaminant.

"Spore(s)" includes, but is not limited to, any substance produced by, emanating from, or arising out of any "fungus/fungi".

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

MONTHLY REPORTING ENDORSEMENT

This endorsement modifies insurance provided under the following:

You must provide a written report of all covered event(s) by sending a monthly enrollment report with premium to us in accordance with the Schedule below. The monthly enrollment report will be in an electronic format acceptable to us. The enrollment report must contain the following minimum information for each covered event:

Any other such information that we may require in order to determine our exposure under this policy.

We will provide an acknowledgment to you for each monthly enrollment report we receive. Reported event(s) will be subject to an audit by us at any time to determine that our exposure was correctly stated on the acknowledgment report according to the terms, conditions, and provisions of this policy.

All premiums must be paid and is fully earned at the inception of the covered event. Premium is calculated in accordance with our rates and premium structure.

Schedule

Reporting Period	Due Date
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No coverage is provided for any event in which you fail to provide a monthly report. Such failure may result in cancellation of the policy in accordance with the cancellation provisions of this policy.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

GENERAL AGGREGATE LIMIT OF LIABILITY ENDORSEMENT

This endorsement modifies insurance provided under the following:

It is understood and agreed that the General Aggregate Limit will apply separately to each event scheduled to this policy.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EMPLOYEE DEFINED

This endorsement modifies insurance provided under the following:

"Employee" as defined in **SECTION V- DEFINITIONS** is deleted in its entirety and replaced by the following:

"Employee" includes a "leased worker", "temporary worker", "volunteer worker", and any person subject to the guidance, instruction or direction of you or anyone acting on your behalf, including but not limited to crew and actors.

"Volunteer worker" as defined in **SECTION V- DEFINITIONS** is deleted in its entirety and replaced by the following:

"Volunteer worker" means a person who donates his or her work and acts at the direction of and within the scope of duties determined by you, and is not paid a fee, salary or other compensation by you or anyone else for their work performed for you.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CROSS SUITS EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury," "property damage," "personal injury" or "personal and advertising injury" arising out of any claim or "suit" asserted by any insured under this policy against any other insured under this policy.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**FALSE ARREST, DETENTION, IMPRISONMENT, LIBEL,
SLANDER, RIGHT TO PRIVACY, ADVERTISING IDEA,
COPYRIGHT, TRADE DRESS AND SLOGAN EXCLUSION**

This endorsement modifies insurance provided under the following:

The following exclusion is added to **SECTION 1—COVERAGES, COVERAGE B – PERSONAL AND ADVERTISING INJURY LIABILITY** paragraph 2. **Exclusions:**

This insurance does not apply to "personal and advertising Injury" arising out of:

- a. False arrest, detention or imprisonment;
- d. Oral or written publication, in any manner, of material that slanders or libels a person or organization or disparages a person's or organizations' goods, products or services;
- e. Oral or written publication, in any manner, of material that violates a person's right of privacy;
- f. The use of another's advertising idea in your "advertisement"; or
- g. Infringing upon another's copyright, trade dress or slogan in your "advertisement".

SECTION V. – DEFINITIONS, 14. "Personal and advertising Injury", paragraphs a., d., e., f., and g. are deleted in their entirety.

All other terms and conditions of this policy remain unchanged.

***NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH***

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED ENDORSEMENT
Operations or Premises Owned by or Rented to You**

This endorsement modifies insurance provided under the following:

SCHEDULE

Name Of Person(s) Or Organization(s):

In consideration of the premium, it is hereby understood and agreed that **SECTION II - Who Is An Insured** is amended to include person(s) or organization(s) shown in the Schedule but only with respect to:

1. Liability arising out of your operations or premises owned by or rented to you, and
2. Properly evidenced by a Certificate of Insurance on file with the Company.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMUNICABLE DISEASE EXCLUSION

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", or "personal and advertising injury" arising out of, resulting from, or otherwise relating in whole or in part to the transmission or exposure to a "Communicable Disease".

For purposes of this endorsement "Communicable Disease" means:

Any condition or disease which is transmitted directly or indirectly to a person from an infected person or animal. Communicable disease includes, but is not limited to, influenza; tuberculosis; conjunctivitis; infectious mononucleosis; acquired immune deficiency syndrome (AIDS), AIDS-related complex (ARC), and positive HIV antibody status; hepatitis A, B, C, and D; meningitis; Severe Acute Respiratory Syndrome (SARS); and sexually transmitted diseases.

All other terms and conditions of this policy remain unchanged.

**NORTH AMERICAN
SPECIALTY INSURANCE COMPANY
MANCHESTER, NH**

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PREMIUM RATE SCHEDULE ENDORSEMENT

This endorsement modifies insurance provided under the following:

Schedule

We calculate Total Policy Premium for the Policy Period from to as follows:

Exposure Base	Additional Exposure Criteria
----------------------	-------------------------------------

Estimated/Deposit Premium:

Total Policy Premium:

Minimum Policy Premium:

Taxes, Surcharges and Fees

(if applicable):

If the Total Policy Premium is more than the Estimated/Deposit Premium, the Additional Premium shown above is due and payable. If the Total Policy Premium is less than the Estimated/Deposit premium, we will refund the difference to you, subject to the Minimum Policy Premium, shown in the Schedule above.

All other terms and conditions of this policy remain unchanged.

Policy Number:

Effective Date of Endorsement:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**PRODUCTION STUNT, PYROTECHNIC &
ANIMAL EXPOSURE EXCLUSION**

This endorsement modifies insurance provided under the following:

This insurance does not apply to "bodily injury", "property damage", "personal injury" or "personal and advertising injury" (if applicable), direct or indirect loss or damage arising out of, resulting from, or otherwise relating in whole or in part to a "Stunt", "Pyrotechnic" or "Animal Exposure" unless specifically declared, accepted by us and endorsed on the policy.

For purposes of this endorsement "Stunts" include:

The performance, rehearsal, preparation for any hazardous activity, including, but not limited to, scenes involving fights, falls, chase scenes, use of aircraft or "mobile equipment", racing of any type, the use of guns, knives or projectile devices.

For purposes of this endorsement, "Pyrotechnics" include:

The use of fireworks, explosives, or pyrotechnic devices.

For purposes of this endorsement, "Animal Exposure" include:

The actions or presence of any animal.

All other terms and conditions of this policy remain unchanged.

SERFF Tracking Number: *NRTH-125778053* *State:* *Arkansas*
Filing Company: *North American Specialty Insurance Company* *State Tracking Number:* *EFT \$50*
Company Tracking Number: *08-03880*
TOI: *17.0 Other Liability - Claims Made/Occurrence* *Sub-TOI:* *17.0001 Commercial General Liability*
Product Name: *Entertainment Program - General Liability*
Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: NRTH-125778053 State: Arkansas
Filing Company: North American Specialty Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: 08-03880
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: Entertainment Program - General Liability
Project Name/Number: /

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty
Review Status: Approved 08/25/2008

Comments:

Attachment:

AR-NAIC Transmittal.pdf

Satisfied -Name: Filing Memorandum
Review Status: Approved 08/25/2008

Comments:

Attachment:

Filing Memorandum - Generic.pdf

Satisfied -Name: Form Indices
Review Status: Approved 08/25/2008

Comments:

Attachment:

Forms Index - Countrywide excl LA & NY.pdf

Property & Casualty Transmittal Document

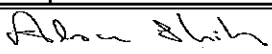
1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

3. Group Name	Group NAIC #
Swiss Reinsurance	181

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
North American Specialty Insurance Company	NH	29874	02-0311919	28

5. Company Tracking Number	08-03880
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Alsa Shih 650 Elm Street Manchester, NH 03101	State Filings Assistant	800-542-9200 ext. 624	603-644-6613	Alsa_Shih@nasins.com
	LeAnne Pope 650 Elm Street Manchester, NH 03101	Team Leader - State Filings	800-542-9200 ext. 693	603-644-6613	LeAnne_Pope@nasins.com
7. Signature of authorized filer					
8. Please print name of authorized filer			Alsa Shih		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	17.0 Other Liability - Occ/Claims Made
10. Sub-Type of Insurance (Sub-TOI)	17.0001 Commercial General Liability
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Entertainment Program
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 10/1/2008 Renewal: 10/1/2008
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	
17. Reference Organization # & Title	
18. Company's Date of Filing	8/21/2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	08-03880
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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North American Specialty Insurance Company (NAS) presents the enclosed filing to make available insurance products designed specifically for entertainment relate risks including motion pictures; documentaries; short term productions; rental houses; recording studios; shows; etc. Please refer to our filing memorandum for the details of this product.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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Check #: EFT
Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

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FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	08-03880			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	08-03880			
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	See Form Indices	See Form Indices	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	Not applicable - all new forms	
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

FILING MEMORANDUM

About This Filing

North American Specialty Insurance Company (NAS) presents the enclosed filing to make available insurance products designed specifically for entertainment related risks including motion pictures; documentaries; short term productions; rental houses; recording studios; shows; etc.

Proposed Effective Date

New and renewal policies effective on or after October 1, 2008 or the earliest possible effective date.

Forms

This filing contains additional miscellaneous endorsements we would like to have available for our Entertainment program. NAS' policies will consist of current company filed Declarations Page and Schedules, miscellaneous endorsements, ISO coverage form and ISO endorsements, including any state mandated endorsement such as cancellation and nonrenewal terms.

Please refer to the attached Forms Index for a complete listing of our proposed independent forms.

Rates and Rules Information

Company Manual Pages AB-RR-002 (06/08)

Policies issued through this product will utilize our rating plan proposed in our manual page listed above. We have attached our premium justification.

North American Specialty Insurance Company
ENTERTAINMENT PROGRAM
GENERAL LIABILITY
Forms Index

Form Title	Form # (ed. date)	Type of Form	Mandatory Conditional Mandatory Optional	Broadens Restricts Clarifies	Rate Impact (Yes or No)	Description of Form
Commercial General Liability Declarations Entertainment Program	NAS-ABGL-DEC (06/08)	Declarations	Mandatory	N/A	No	Line of Business Declarations Page
Liquor Liability Declarations Entertainment Program	NAS-ABLL-DEC (06/08)	Declarations	Conditional Mandatory	N/A	No	Line of Business Declarations Page
Schedule of Forms	NAS-ABF-SCH (06/08)	Schedule	Mandatory	N/A	No	Index of forms included in line of business
Comprehensive Personal Liability Coverage	NAS-ABCPL-POL (06/08)	Coverage Form	Conditional Mandatory	N/A	Yes	Terms and conditions specific to CPL coverage part
Personal Liability Schedule	NAS-ABCPL-SCH (06/08)	Endorsement	Conditional Mandatory	Clarifies	Yes	Schedule of CPL exposures
Policy Changes	NAS-AB-PC1 (06/08)	Endorsement	Optional	N/A	Yes/No	This policy change endorsement will be used to make amendments after the policy has been issued, such as add or delete forms, address changes, typographical corrections, change exposures and/or limits, or any other changes that do not require prior approval from the state insurance department.
Policy Changes	NAS-AB-PC2 (06/08)	Endorsement	Optional	N/A	Yes/No	Continuation of NAS-AB-PC1 to be used when there are additional changes that could not fit on PC1.
Covered Production Limitation Endorsement	NAS-AB-001 (06/08)	Endorsement	Optional	Clarifies	No	Restricts eligible productions to those types specified on this endorsement.
Final Audit	NAS-AB-002 (06/08)	Endorsement	Optional	N/A	No	Worksheet to establish final exposures and applicable adjustments at the end of the policy term.
Minimum Premium Endorsement	NAS-AB-003 (06/08)	Endorsement	Optional	N/A	No	Specifies the minimum premium.
Non-Insured Production Entity Conditional Exclusion	NAS-AB-004 (06/08)	Endorsement	Optional	Restricts	No	Restricts coverage so that coverage applies only to named insureds scheduled in the policy.

North American Specialty Insurance Company
ENTERTAINMENT PROGRAM
GENERAL LIABILITY
Forms Index

Form Title	Form # (ed. date)	Type of Form	Mandatory Conditional Mandatory Optional	Broadens Restricts Clarifies	Rate Impact (Yes or No)	Description of Form
Schedule of Feature Film Productions	NAS-AB-005 (06/08)	Endorsement	Optional	Clarifies	No	Schedule to list covered feature films
Unscheduled Production, Presentation or Event Exclusion	NAS-AB-006 (06/08)	Endorsement	Optional	Restricts	No	Restricts coverage by not allowing coverage to productions, events, presentations not declared.
Schedule of Events	NAS-AB-007 (06/08)	Endorsement	Optional	Clarifies	No	Schedule to list events covered in the policy.
Schedule of Productions	NAS-AB-008 (06/08)	Endorsement	Optional	Clarifies	No	Schedule to list productions covered in the policy.
Schedule of Covered Stunt Activities	NAS-AB-009 (06/08)	Endorsement	Optional	Clarifies	No	Schedule to list stunts covered in the policy.
Specified Production Dates	NAS-AB-010 (06/08)	Endorsement	Optional	Clarifies	No	Allows for a staggered and non-consecutive coverage term.
Venue Rating Schedule	NAS-AB-200 (06/08)	Endorsement	Optional	N/A	No	Lists the applicable rates
Lessee Conditional Exclusion	NAS-AB-201 (06/08)	Endorsement	Optional	Restricts	No	Requires that renters have their own insurance
Limited Aircraft Coverage Endorsement	NAS-AB-202 (06/08)	Endorsement	Optional	Broadens	No	Provides coverage for aircraft uses as a set or prop.
Newly Acquired or Formed Entity Exclusion	NAS-AB-205 (06/08)	Endorsement	Optional	Restricts	No	Restricts coverage for new entities under the insured's policy.
Promoters Rating Schedule	NAS-AB-206 (06/08)	Endorsement	Optional	N/A	No	Lists the applicable rates
Promotion Limitation Endorsement	NAS-AB-207 (06/08)	Endorsement	Optional	Restricts	No	Does not allow certain types of promotional activities
Property Damage to Rented Premises Exclusion	NAS-AB-208 (06/08)	Endorsement	Optional	Restricts	No	Removes coverage for locations rented for productions or events.
Total Pollution Exclusion Endorsement	NAS-AB-209 (06/08)	Endorsement	Optional	Restricts	No	Removes coverage for pollution (applicable to GL coverage)

North American Specialty Insurance Company
ENTERTAINMENT PROGRAM
GENERAL LIABILITY
Forms Index

Form Title	Form # (ed. date)	Type of Form	Mandatory Conditional Mandatory Optional	Broadens Restricts Clarifies	Rate Impact (Yes or No)	Description of Form
TULIP Rating Schedule	NAS-AB-210 (06/08)	Endorsement	Optional	N/A	No	Lists the applicable rates
Employment-Related Practices Exclusion	NAS-AB-211 (06/08)	Endorsement	Optional	Restricts	No	Removes employment practices coverage
Total Pollution Exclusion Endorsement	NAS-AB-212 (06/08)	Endorsement	Optional	Restricts	No	Removes coverage for pollution (applicable to CPL coverage)
Workers' Compensation Residence Employee	NAS-AB-213 (06/08)	Endorsement	Optional	Broadens	Yes	Adds coverage for residence employees
Concessionaire/Exhibitor Rate Endorsement	NAS-AB-214 (06/08)	Endorsement	Optional	N/A	No	Lists the applicable rates
Condition – Periodic Reporting	NAS-AB-215 (06/08)	Endorsement	Optional	Clarifies	No	Clarifies the reporting periods
Premium Rate Schedule	NAS-AB-216 (06/08)	Endorsement	Optional	N/A	No	Lists the applicable rates
Additional Insured – Owners or Lessees Schedule Person or Organization Co-Primary Endorsement	NAS-AB-400 (06/08)	Endorsement	Optional	Broadens	No	Additional insureds with co-primary wording
Additional Insured – Owners or Lessees Schedule Person or Organization Excess Endorsement	NAS-AB-401 (06/08)	Endorsement	Optional	Broadens	No	Additional insureds with excess wording
Additional Insured – Owners or Lessees Schedule Person or Organization Primary and Noncontributory Endorsement	NAS-AB-402 (06/08)	Endorsement	Optional	Broadens	No	Additional insureds with primary wording
Assault and Battery Exclusion	NAS-AB-403 (06/08)	Endorsement	Optional	Restricts	No	Disallows assault and battery coverage.
Informational ContentExclusion	NAS-AB-404 (06/08)	Endorsement	Optional	Restricts	No	Disallows coverage for advice, suggestions, directions or instructions given to another.
Injury to Participants in Sports or Athletics Activities Exclusion	NAS-AB-405 (06/08)	Endorsement	Optional	Restricts	No	Disallows coverage for participants of sporting events.

North American Specialty Insurance Company
ENTERTAINMENT PROGRAM
GENERAL LIABILITY
Forms Index

Form Title	Form # (ed. date)	Type of Form	Mandatory Conditional Mandatory Optional	Broadens Restricts Clarifies	Rate Impact (Yes or No)	Description of Form
Libel, Slander, Right to Privacy, Advertising Idea, Copyright, Trade Dress and Slogan Exclusion	NAS-AB-406 (06/08)	Endorsement	Optional	Restricts	No	Disallows exposures that should be covered under a separate E&O policy.
Limited Additional Insured – Attractions, Exhibitors, Food or Non-Food Concessionaires	NAS-AB-407 (06/08)	Endorsement	Optional	Broadens	No	Provides coverage for vendors at events.
Moshing Exclusion	NAS-AB-408 (06/08)	Endorsement	Optional	Restricts	No	Disallows mosh pits at events.
Non-Performing Animal Exclusion	NAS-AB-409 (06/08)	Endorsement	Optional	Restricts	No	Removes animal liability for non-performing animals
Rap and Hip-Hop Conditional Exclusion	NAS-AB-410 (06/08)	Endorsement	Optional	Restricts	No	Disallows events with live rap music
Unscheduled Products Limitation Endorsement	NAS-AB-411 (06/08)	Endorsement	Optional	Restricts	No	Limits products coverage to food, beverage, clothing and related items.
Seating, Glass & Fixtures Exclusion	NAS-AB-412 (06/08)	Endorsement	Optional	Restricts	No	Disallows coverage resulting from certain types of seating, glass and fixtures.
Security Service Conditional Limitation	NAS-AB-413 (06/08)	Endorsement	Optional	Restricts	No	Requires that any security company utilized by the insured provide proof of insurance.
Attendance Limitation Endorsement	NAS-AB-415 (06/08)	Endorsement	Optional	Restricts	No	Caps the maximum attendance.
Event Limitation Endorsement	NAS-AB-416 (06/08)	Endorsement	Optional	Restricts	No	Disallows certain types of events.
Hazardous Activities, Pyrotechnic & Animal Exposure Exclusion	NAS-AB-417 (06/08)	Endorsement	Optional	Restricts	No	Disallows hazardous activities on events.
Liquor Liability Exclusion	NAS-AB-418 (06/08)	Endorsement	Optional	Restricts	No	Removes host liquor
Overnight, Outdoor and Temporary Camping Conditional Exclusion	NAS-AB-419 (06/08)	Endorsement	Optional	Restricts	No	Disallows overnight camping at events.

North American Specialty Insurance Company
ENTERTAINMENT PROGRAM
GENERAL LIABILITY
Forms Index

Form Title	Form # (ed. date)	Type of Form	Mandatory Conditional Mandatory Optional	Broadens Restricts Clarifies	Rate Impact (Yes or No)	Description of Form
Partnership, Joint Venture and Limited Liability Company Exclusion	NAS-AB-420 (06/08)	Endorsement	Optional	Restricts	No	Disallows coverage for entities not scheduled on the policy.
Rental Receipts Conditional Endorsement	NAS-AB-421 (06/08)	Endorsement	Optional	Restricts	No	Requires rental houses to obtain proof of insurance from their customers.
Eligible Classes of Production(s), Presentation(s) or Event(s) Limitation Endorsement	NAS-AB-422 (06/08)	Endorsement	Optional	Restricts	No	Limits the types of productions that are allowed
Absolute Asbestos Exclusion	NAS-AB-423 (06/08)	Endorsement	Optional	Restricts	No	Disallows asbestos.
Abuse or Sexual Molestation Exclusion	NAS-AB-424 (06/08)	Endorsement	Optional	Restricts	No	Disallows abuse and molestation
Lead Contamination Exclusion	NAS-AB-425 (06/08)	Endorsement	Optional	Restricts	No	Disallows Lead
Media Content Exclusion	NAS-AB-426 (06/08)	Endorsement	Optional	Restricts	No	Disallows certain exposures that should be covered on a separate E&O policy.
Throwing Objects Exclusion	NAS-AB-427 (06/08)	Endorsement	Optional	Restricts	No	Disallows the throwing of objects by performer.
Fungus, Mildew and Mold Exclusion	NAS-AB-428 (06/08)	Endorsement	Optional	Restricts	No	Disallows mold type exposures.
Monthly Reporting Endorsement	NAS-AB-429 (06/08)	Endorsement	Optional	n/a	No	Lists the reporting frequency
General Aggregate Limit of Liability Endorsement	NAS-AB-430 (06/08)	Endorsement	Optional	Broadens	No	Applies a separate aggregate to each event
Employee Defined	NAS-AB-432 (06/08)	Endorsement	Optional	Clarifies	No	Clarifies the definition of employee.
Cross Suits Exclusion	NAS-AB-433 (06/08)	Endorsement	Optional	Restricts	No	Disallows suits between insureds
False Arrest, Detention, Imprisonment, Libel, Slander, Right to Privacy, Advertising Idea, Copyright, Trade Dress and Slogan Exclusion	NAS-AB-434 (06/08)	Endorsement	Optional	Restricts	No	Disallows false arrest and other similar perils.

North American Specialty Insurance Company
ENTERTAINMENT PROGRAM
GENERAL LIABILITY
Forms Index

Form Title	Form # (ed. date)	Type of Form	Mandatory Conditional Mandatory Optional	Broadens Restricts Clarifies	Rate Impact (Yes or No)	Description of Form
Additional Insured Endorsement Operations or Premises Owned by or Rented to You	NAS-AB-435 (06/08)	Endorsement	Optional	Broadens	No	Expands coverage to include additional insureds.
Communicable Disease Exclusion	NAS-AB-436 (06/08)	Endorsement	Optional	Restricts	No	Disallows certain communicable diseases
Premium Rate Schedule Endorsement	NAS-AB-500 (06/08)	Endorsement	Optional	n/a	No	Lists the applicable rates.
Production Stunt, Pyrotechnic & Animal Exposure Exclusion	NAS-AB-600 (06/08)	Endorsement	Optional	Restricts	No	Disallows coverage for stunts on productions